PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 Application or Docket Number 0 0 7 6 8 / 0													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER	
TOTAL CLAIMS			24					RATE		EE		RATE	FEE
FOR			NUMBER FILED NUMBER EXTRA			SER EXTRA		BASIC FEE 370.00		70.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS				nus 20=	•	4			X\$ 9=		OR	X\$18=	72.00
INDEPENDENT CLAIMS			9 minus 3 =					X42=			OR	X84=	
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+140=			OR	+280=	
• 11	* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL			OR	TOTAL	x12.
K I	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OR	OTHER SMALL	
AMENDMENT A .		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	AI	DDI- DNAL EE		RATE	ADDI- TIONAL FEE
Ş	Total	· Sel	Minus	- 6	34	=		X\$ 9=			OR	X\$18=	
ME	Independent	. 4	Minus	***	3	-		X42=	1		OR	X86=	86.ω
		NTATION OF MI					l	· · · · ·	╁		Or.		<i>.</i>
₩.	OLLAN							+140=.			OR	+280=	2 .
٦								ADDIT. FEE				OR ADDIT. FEE	
1	(Column 1) (Column 2) (Column 3)												
AMENOMENT B		REMAINING AFTER AMENDMENT	-	NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	TIC	DDI- DNAL EE		RATE	ADDI- TIONAL FEE
	Total	. 8	Minus	• 6	24	= -		X\$ 9=		Of	OR	X\$18=)
AME	Independent	• 2	Minus	***	Ŋ	=		X42=	T		OR	X84=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			ОЯ	+280=	J
	^	/// (Column 1)	10	,00			L	TOTAL				TOTAL	
	8/19	10 Y					A	DDIT. FEI	Ē L		OR ,	ADDIT. FEE	,
		(Column 1) CLAIMS		(Colun		(Column 3)	1 -		7			-	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA		RATE	TIO	DI- NAL EE	Y	RATE	AØDI- TIONAL FEE
DE M	Total	. 5	Minus	** 8	4,	= 0		X\$ 9=	Τ"	\neg	OR	X\$18=/	, , <u></u>
MEN	Independent	• /	Minus	444	4	= 0	 -		+		i	$-\times$	
۲	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	X42=	-		OR	X84 ⁴	_
								+140=		ŀ	OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE													
•	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											<i>i</i> mn 1.	

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 Application or Docket Num OCTOBER OCT											nber	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS	24					RATE		FEE	1	RATE	FEE	
FOR		NUMBER	FILED	NUMBER EXTRA			BASIC F	Eξ	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE	24 mi	nus 20=	•	4		X\$ 8=			OR	X\$18=	72.2	
INDEPENDENT CLAIM	3 "	= C euni	ے '			X42=			OR	X84=		
MULTIPLE DEPENDE	NT CLAIM P	RESENT					+140=			OR	+280=	
* If the difference in c	less than zero, enter "O" in column 2					TOTAL			OR	TOTAL	42.	
KI_I / CLAIMS AS AMENDED - PART II								- 1		,	OTHER	THAN
1904 ((Column 1) (Column 2) (Column 3)						SMAL	LE	NTITY	OR	SMALL	ENTITY
	CLAIMS EWAINING AFTER KENDMENT		NUM PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total •	84	Minus	- 6	34	. 0		X\$ 9=			ОЯ	X\$18=	
Total . Independent .	4	Minus		3	-]		X42=	1		OR	X8 ∳ =	86.W
FIRST PRESENTA				1310	•	¹	+140=			OR	+280=	
	1) le 84 (Column 1) (Column 2) (Column 3)							ב ב		OR	YOYAL ADDIT, FEE	80.00
1/6/24 R												
 	CLAINS EMAINING AFTER IENDMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total •	8	Minus	- 6	24			X\$ 9=			OR	X\$18≃	_
Independent •	2	Minus	EMOENT.	N/	3 -	П	X42=	T		QR	X84=	-
PINST PRESENTAL	TON OF INC	CHIPLE DE	610811	COM		'[+140=			ОЯ	+280=	ſ
9-14-0	25					_	YOTA DDIT, FE			OR	TOTAL ADDIT, FEE	ت .
(C	Olumn_1}		(Colum		(Column 3)	,						
C) RE	CLAIMS EMAINING AFTER ENDMENT		HIGH NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE
AM Total .	5	Minus	. 0	4	.0	I	X\$ 9=	T		OR	X\$18=	
Independent •	/	Minus	400 CA10CAC	4	2		X42=	T		OR	X8,4=	
FIRST PRESENTAT	IUN OF MU	LIPLE DEF	ENDENT	CLAIM			+140=	†		OR	260 =	1
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							TOTAL			. !	TOTAL	
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												